Minus Independent FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

Person and Transmist Caron, U.S. DEPARTMENT OF COMMERCE AUSTONII ABUST IND

X42=

+140=

X84-

+280=

ADDIT FEE

OR

OR

^{*} If the entry in column 1 is less than the entry in column 2, write "V" in column 3.
** If the "Righest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.
***If the "Righest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3.

The "Righest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.